

**Report to Congress
on Program Expenditures for the
Housing for Persons with AIDS (HOPWA) Program**

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I. Introduction

The Department welcomes this opportunity to provide information on the HIV/AIDS housing programs, administered by State, cities, and nonprofits that receive funding under the Housing for Persons with AIDS (HOPWA) program. Since 1992, the HOPWA program has played a vital role in addressing the housing and supportive service needs of low-income persons living with HIV/AIDS and their families.

The report is developed to respond to House Appropriations Committee Report 108-235, filed to accompany H.R. 2861, the Department of Veteran's Affairs and Housing and Urban Development and Independent Agencies Appropriations Bill, 2004 (p.31). The committee requested that the Department prepare a report to the Appropriations Committee on program expenditures under the HOPWA program. Specifically, the conference report requested a report on the distribution of HOPWA funds in the last three years for hard housing versus service and care expenses in both the formula and national competitive programs. Additionally, the request included identification of distribution of funding among various categories of services and care in the HOPWA program, specifically the total spent on case management, as well as a definition of the types of services allowable under case management.

II. Background of the HOPWA Program

The HOPWA program is authorized under the AIDS Housing Opportunity Act, Section 851 of the National Affordable Housing Act, 42 U.S.C. 12901. This Act created a statutory purpose to "provide States and localities with the resources and incentives to devise long-term comprehensive strategies for meeting the housing needs of persons with acquired immunodeficiency syndrome and families of such persons." HOPWA activities are carried out within the Department's central mission in providing a decent, safe, and sanitary home and a suitable living environment for all Americans.

The HOPWA program is the federal government's primary targeted response to the pressing housing needs of persons living with HIV/AIDS and their families. Since its initiation in 1992, the HOPWA program has reached a large number of persons living with HIV/AIDS and has assisted them in finding and accessing affordable housing. HOPWA providers make use of the program to target assistance to recipients to prevent their slide into homelessness and reduce the detrimental health effects that are particularly devastating for persons with suppressed immune systems.

HOPWA gives local communities the capability to devise the most appropriate and effective housing strategies for community members with HIV/AIDS and their families. HOPWA grantees develop comprehensive community-wide strategies and form partnerships with area nonprofit organizations to provide housing assistance and supportive services for eligible persons. Grantees provide forums for public participation and consultation in the design, planning, operations, and evaluation of the combined efforts.

HOPWA assistance is provided as: (1) short-term rent, mortgage, and utility payments that prevent homelessness; (2) rental housing assistance; and (3) supportive housing in facilities for clients with greater needs. These efforts have helped many persons avoid unnecessary hardship and the greater costs of hospitalization, creating appropriate responses to the needs of persons with HIV/AIDS who have become homeless or who are at risk of homelessness.

A. Eligible Activities

Under the HOPWA program, funds may be used for a wide array of housing, supportive services, program planning, and development costs.

Eligible activities include, but are not limited to:

- Acquisition and rehabilitation of housing units;
- New construction of community residences and single room occupancy dwellings;
- Costs for operation and maintenance of housing facilities;
- Rental assistance programs;
- Short-term payments for rent, mortgage, and utilities to prevent homelessness;
- Planning and program development, including program evaluation;
- Supportive services including health care, mental health services, drug and alcohol abuse treatment and counseling, intensive care when required, nutritional services, transportation, and case management;
- Administrative costs (limited to 3% for grantees and 7% for project sponsors); and
- Housing information services for clients.

The eligible activities are subject to certain standards and limitations found in the regulations and further described in HUD guidance. HOPWA regulations prohibit the use of HOPWA funds for health services, to the extent that payments can be accessed through other funding sources. In 1998, HUD further clarified limits on use of HOPWA funds for any health care costs, such as AIDS drug assistance, as other programs exist for these purposes. Committing HOPWA funds for such purposes was deemed ineligible and such restrictions are part of the standard HOPWA grant agreement.

To the extent possible, HUD encourages projects to incorporate mainstream resources into all HOPWA eligible activities. Grantees are encouraged to maximize the benefit of HOPWA funding by accessing private, other public, and mainstream services and housing programs that provide benefits to eligible persons. Grantees are encouraged to create community-wide strategies to coordinate assistance to eligible persons through these programs. Mainstream programs may include Medicaid, Children's Health Insurance Program, Temporary Assistance for Needy Families, Food Stamps, and services funded through the Mental Health Block Grant and Substance Abuse Block Grant, Workforce Investment Act and the Welfare-to-Work grant program. HUD also collaborates with HHS and other federal agencies at a national level on the Interdepartmental Task Force to help improve special needs providers' access to mainstream resources.

B. HOPWA Clients

Persons eligible for assistance under the HOPWA program must meet two requirements. HOPWA assisted persons must be low-income, and must be diagnosed with AIDS or HIV. Family members who reside with the eligible person may also be assisted, if the family is a low-income family at less than 80% of median income. Except for persons in short-term supportive housing that prevents homelessness, each household receiving rental assistance or residing in assisted housing under HOPWA must make resident rent payments, calculated at 30% of the family's adjusted monthly income. Information on the HIV status of a client is confidential and must be maintained in a manner that guarantees confidentiality, as required by law.

HOPWA grantees report their programs overwhelmingly serve persons whose incomes are low or extremely low. A 2001 HUD Policy Development and Research (PD&R) study found that

54% of persons receiving assistance from the program have extremely low incomes (less than 30% of area median income) and another 27% have very low incomes (30-50% of area median income).

Additionally, approximately one-third of all HOPWA grantees are targeting their programs to serve subpopulations within the overall population of low-income persons living with HIV/AIDS, including persons with mental illness, persons with chronic substance abuse problems, and homeless persons. Approximately 16% of all HOPWA clients are homeless or in transitional housing, while about half come from rental housing situations immediately prior to receiving assistance through the HOPWA program.

Grantees work to provide stable housing for clients as it is critical to increasing the ability of clients to focus on maintaining good health and adhering to medication regimens. As the PD&R 2001 study reports, based on clients' housing situations when they leave the program, housing stability appears to have been enhanced by HOPWA assistance. The study found that persons who have been receiving HOPWA assistance almost always remained housed after the assistance ended. The Department is currently collaborating with HOPWA grantees and technical assistance providers to enhance the performance outcomes measures to better demonstrate how well projects achieve housing stability, reduce the risk of homelessness, and improve access to HIV treatment and health care for HOPWA clients.

C. Distribution of Funds

Since 1992, HOPWA funds have been appropriated to support community efforts to create and operate HIV/AIDS housing initiatives.

HOPWA grants are provided:

- (1) By formula allocations for ninety (90) percent of the appropriation to States and metropolitan areas with the largest number of cases and incidence of AIDS; and
- (2) By competitive selection for ten (10) percent of the appropriation for projects proposed by States, local governments, and nonprofit organizations.

Figure 1 below provides recent appropriations and grant awards under the HOPWA program.

Figure 1: HOPWA Appropriations and Grant Awards FY 2000 - 2003

Fiscal Year	HOPWA Allocation	Formula Grants	Number of Formula Grants	Competitive Grants	Number of Competitive Grants	Technical Assistance Grants	Number of TA Grants
2003	\$290,102,000	\$259,304,000	111	\$28,811,000	TBD	\$1,987,000	TBD
2002	\$277,432,000	\$247,889,000	108	\$27,543,000	28	\$2,000,000	2
2001	\$257,432,000	\$229,372,000	105	\$25,486,000	25	\$2,574,000	3
2000	\$232,000,000	\$207,234,000	101	\$23,026,000	22	\$1,740,000	2

**Dollars include recaptured funds of \$597,321 in 2000.*

Formula Grants

Ninety percent of HOPWA funds are distributed through formula-based allocations to qualifying cities for Eligible Metropolitan Statistical Areas (EMSAs) and eligible States for areas outside of EMSAs.

Eligible formula areas must have at least 1,500 cumulative cases of AIDS, reported by the Centers for Disease Control (CDC) as of March 31 prior to the appropriation year, and metropolitan areas must have a population of at least 500,000. Administrative provisions have retained eligibility for grantees that no longer qualify for HOPWA funding. In June 2003, OMB issued new definitions of metropolitan statistical areas (MSA) and HUD is implementing their use in FY 2004 for HOPWA grants administration.

By statute, one-quarter of the formula is allocated to metropolitan areas that have a higher than average per capita incidence of AIDS. For all formula calculations, HUD uses AIDS surveillance data from the CDC. In FY 2003, \$259.302 million was allocated by formula to 111 grantees, to the qualifying cities for 75 EMSAs, and to 36 eligible states for areas outside of EMSAs.

At the local level, a range of public agencies administers HOPWA formula grants in their recipient communities. Agencies include housing, planning, and community development agencies; health, human services, and welfare agencies; or grants management offices. The range of efforts formula grantees undertake include planning, housing development, provision of rental assistance, client assessment and referral, provision of supportive services, program evaluation, housing information services, and coordinating of services.

Descriptions of each HOPWA formula program and performance summaries are available online at: <http://www.hud.gov/offices/cpd/aidshousing/programs/formula/index.cfm>.

Competitive Grants

Ten percent of HOPWA funds are awarded by competition. Competitive grants and their programs help recipients in expanding housing options for persons living with AIDS. Annually, HUD selects model AIDS housing programs that combine care and housing activities to create or maintain community AIDS housing initiatives as Special Projects of National Significance. A number of HOPWA grants are also targeted to areas that currently do not receive formula funding. Competitive projects serve as demonstration projects for increasing knowledge of ways to provide responsive housing and care. In recent appropriations, HOPWA was required to give attention to renewals of permanent supportive housing. In FY 2001, 22 of 25 competitive grants awarded were renewals, and in FY 2002, 14 of 28 grants were renewals under this requirement.

In April 2003, HUD announced the availability of HOPWA competitive funds through HUD's SuperNOFA process. Under this year's competition, HUD will give priority for the renewal of existing contracts that provide permanent supportive housing. Applications received are currently under review and will be rated according to the guidelines outlined within the SuperNOFA.

Descriptions of the HOPWA competitive program and previously awarded grants are available online at: <http://www.hud.gov/offices/cpd/aidshousing/programs/competitive/index.cfm>.

Technical Assistance Grants

In addition to formula and competitive funding for projects, the FY 2003 appropriation makes \$1.987 million available for training, oversight, and technical assistance activities. In prior years, HUD has used these funds to promote the sound management of HOPWA projects along with grantee sponsored training activities in partnership with a number of qualified providers.

HOPWA technical assistance supports program goals by ensuring the sound management of HOPWA programs; reaching underserved populations, including racial and ethnic minorities, women, persons in rural areas, youth, and post-incarcerated populations through assistance; helping communities develop comprehensive strategies for HIV/AIDS housing; providing information to connect clients with assistance; and using HUD information management tools to help achieve performance at the highest levels.

Descriptions of the HOPWA Technical Assistance Program and its grantees are available online at: <http://www.hud.gov/offices/cpd/aidshousing/programs/technical/index.cfm>.

III. Program Expenditures

HOPWA assistance provides housing as well as access to related health care and other services for individuals and families who face the difficult challenges of living with HIV and AIDS and the increased risks of homelessness. The program has helped many communities establish strategic AIDS housing plans, improve coordination of local and private efforts, fill gaps in local systems of care, and create new housing resources.

Since 1995, the HOPWA program has coordinated with other HUD programs through the Consolidated Planning process. Under this requirement, HOPWA grantees must complete a needs assessment and strategic plan that addresses special needs for HOPWA clients. In this plan, grantees outline their supportive housing strategy for using HOPWA dollars and other leveraged dollars to provide a continuum of housing and related services for persons living with HIV/AIDS. This comprehensive planning ensures HOPWA programs provide a successful and cost-effective combination of affordable housing with services that help people live more stable and productive lives.

Annually, HOPWA grantees are required to collect information on the use of program funds, including expenditure and beneficiary information. Formula grantees are required to provide accomplishment information to the public on an annual basis under the Consolidated Performance and Evaluation Report (CAPER). These jurisdictions access funds and provide data on accomplishments to HUD through the active use of the Department's Integrated Disbursement and Information System (IDIS). All competitive grantees also provide annual accomplishment information to HUD in the HOPWA Annual Progress Report (APR). The IDIS and APR formats collect similar types of information. Although data collection on housing and service separate these activities, generally, these efforts are highly integrated with services provided on site at a supportive housing facility or in association with program support for tenants in scattered site rental units to help maintain their stability.

The following section of this report provides accomplishment information collected from HOPWA grantees based on their annual program cycle. HOPWA grantees report on a program year basis. Data represents activities undertaken by both formula and competitive grantees during program years 2000-2001 and 2001-2002. These two program years represent the most recent, accurate, and comprehensive picture of HOPWA activities.

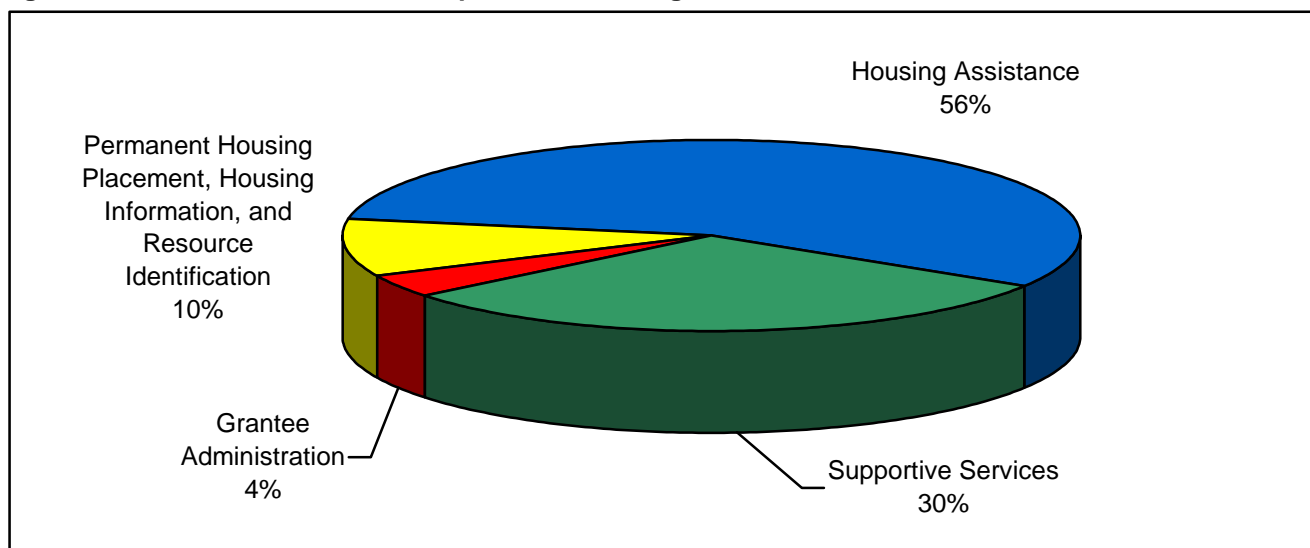
Throughout the report, figures for program year 2002 are provided when available. The largest number of grantees operate on a July to June year and will report to HUD by October 1, 2003 on their 2002 year's accomplishments. HUD expects the data for program year 2002 to be completed by December 31, 2003, for all current HOPWA grantees.

A. Overview of Program Expenditures

The HOPWA program provides for a broad variety of eligible housing and service activities. In program years 2000-2001 and 2001-2002, grantees spent an average of 66 percent of their HOPWA funds to provide housing assistance, including direct housing subsidies, housing development costs, housing operating expenses, housing information, and permanent housing placement services. Grantees spent approximately 30 percent of HOPWA funds to provide supportive services in connection with housing assistance provided to HOPWA clients. An additional 4 percent was spent for administration. A significant amount of others funds were also leveraged to provide assistance for HOPWA eligible persons through collaborations at the local level.

Figure 2 below highlights the distribution of funding under the HOPWA eligible activities for both the formula and competitive programs. Additional detail on each category is provided in the sections that follow.

Figure 2: Distribution of HOPWA Expenditures – Program Years 2000-2001 and 2001-2002



SOURCE: IDIS, APR and CAPER Data

B. Housing Expenditures

Eligible Activities under HOPWA

The HOPWA program's flexibility allows grantees to determine the appropriate types of housing assistance that meet a client's housing needs and preferences along with support for immediate emergency needs and transitional housing purposes. Housing assistance eligible under HOPWA includes rental vouchers, short-term rent, mortgage, and utility payments (STRMU) or residence in supportive housing. Activities associated with housing assistance covered under HOPWA include, but are not limited to: the acquisition, rehabilitation or new construction of community residences and SRO units; costs for the operation and maintenance of facilities and community residences; rental assistance; and short-term payments to prevent homelessness.

These various types of housing assistance offer significantly different forms of assistance along a continuum of support, from short-term and often small subsidies that help families avoid homelessness, to on-going forms of rental payments, to assistance in facilities that may range from independent living environments to higher levels of care in assisted facilities. Generally, each type of program also offers assistance onsite or improves access to community supportive services. Details on those expenditures are provided later in this report.

Total Number of Units

HOPWA housing assistance supported over 84,000 households in program year 2001. Figures 3 and 4 detail the number of units provided by HOPWA formula and competitive grantees since 1999. Chart 4 illustrates that for program years 2000 and 2001, HOPWA formula and competitive grantees provided 55% of HOPWA housing assistance as short-term rent, mortgage, and utility payments. Rental assistance accounts for 25% of HOPWA supported units, and supportive facility-based housing comprises 20% of HOPWA units.

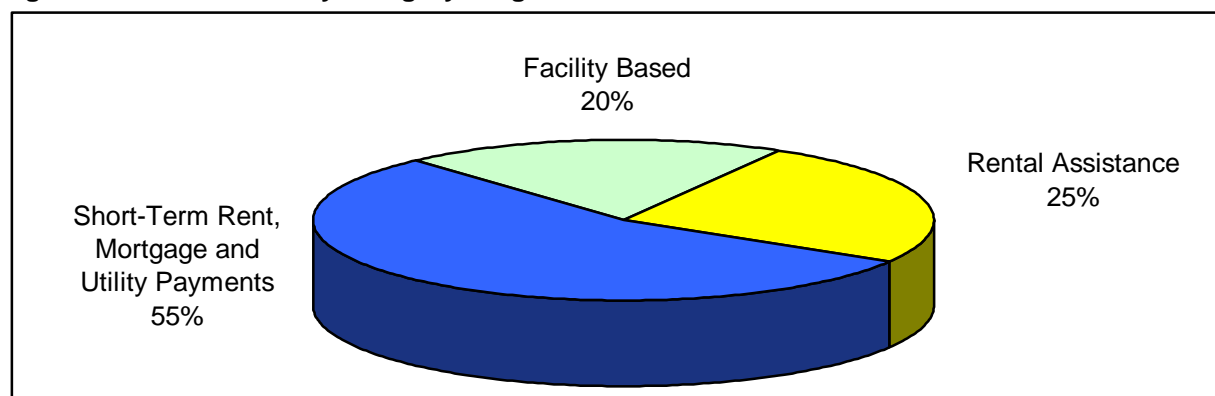
Figure 3: Total HOPWA Housing Assistance Units by Category 1999-2002*

Program Year	Rental Assistance Units	Short-Term Rent, Mortgage, Utility Payments	Facility-Based Supportive Housing Units	Total Units
1999	12,101	25,606	6,906	44,613
2000	18,451	45,933	16,827	81,211
2001	23,228	44,432	16,399	84,059
2002*	5,171	7,871	1,396	14,438

SOURCE: 1999 Report to Congress, IDIS, APR, and CAPER Data

**Data notes: A portion of the increases from 1999 to 2000 can be attributed to improvements in data collection and refinement of measurement instruments. Program Year 2002 represents approximately 20% of all HOPWA dollars expended in that year.*

Figure 4: HOPWA Units by Category Program Years 2000-2001 and 2001-2002



SOURCE: CAPER and APR Data

Expenditures on Housing

Grantee data shows that housing assistance is the largest single activity supported by HOPWA formula and competitive funds. HOPWA housing assistance is primarily being provided in the form of tenant-based rental assistance and short-term payments for rent, mortgage, and utilities. Figure 5 provides a breakdown of funds expended on housing assistance by program year. As the table shows, over \$400 million dollars has been expended on housing since 1999. HOPWA grantees also report significant leveraging in their housing assistance programs. In program year 2001, over \$276 million dollars was leveraged with HOPWA dollars to provide housing assistance to HOPWA eligible clients. In program year 2001, for every HOPWA dollar expended, \$2.05 was leveraged by other funds.

Figure 5: Housing Assistance Expenditures by Category 1999-2002*

Program Year	Rental Assistance	Short-Term Rent, Mortgage, Utility Payments	Facility-Based Supportive Housing	Total Expenditures
1999				\$95,688,826
2000	\$50,753,602	\$25,474,526	\$85,058,139	\$161,286,267
2001	\$65,889,858	\$33,912,999	\$52,009,281	\$151,812,138
2002*	\$13,582,052	\$5,507,079	\$14,497,002	\$33,586,133

SOURCE: 1999 Report to Congress, IDIS, APR, and CAPER Data

**Data notes: A portion of the increases from 1999 to 2000 can be attributed to improvements in data collection and refinement of measurement instruments. Program Year 2002 represents approximately 20% of all HOPWA dollars expended in that year.*

Average Cost

Described below are average costs for different types of housing. Small, limited short-term payments and ongoing monthly payments differ in cost when compared to supportive housing units. Supportive housing facilities generally offer a greater level of care, such as daily support for its residents, thereby increasing the overall cost per unit.

The information in Figure 6 shows the average HOPWA direct cost per unit of supportive housing facility assistance is approximately \$4,000 for formula grantees. These costs-per-unit figures do not include related costs for operations, services, or related programs associated with facility-based housing assistance that is expected to be significant. The average cost for tenant-

based rental assistance with HOPWA funds is \$2,650 per unit of housing supported during that operating year.

The average cost of short-term payments under HOPWA formula programs is approximately \$660 per unit (reflecting a statutory time limit of 21 weeks in any 52 week period). The data shows that HOPWA rental assistance is significantly less than average costs for Section 8 rental assistance (estimated at approximately \$6600 per unit per year). These housing costs do not include related costs that might be involved in assisting clients, such as services or site costs provided by other programs or the related value of property or capital leveraged for projects. Competitive figures show similar data and are noted below.

Figure 6: Average HOPWA dollars per unit – Program Year 2001

Grantee Type	Rental Assistance	Short-Term Rent, Mortgage, and Utility Payments	Facility-Based Supportive Housing
Formula	\$2,650	\$664	\$3,967
Competitive	\$2,506	\$967	\$8,913

SOURCE: IDIS, APR and CAPER Data

Figure 7 below illustrates the average amount of dollars leveraged for each HOPWA unit, as reported by HOPWA formula grantees in their program year 2001 CAPERs. The data shows that in housing assistance programs, grantees are utilizing other funding to supplement HOPWA housing assistance. Specifically, under HOPWA facility-based housing, other resources are significantly leveraged with HOPWA dollars to fund capital costs, rehabilitation, and acquisition. In program year 2001, over \$276 million dollars was leveraged with HOPWA dollars to provide housing assistance to HOPWA eligible clients.

Figure 7: Average Leveraged dollars per unit– Formula Grantees – Program Year 2001

Grantee Type	Rental Assistance	Short-Term Rent, Mortgage, and Utility Payments	Facility-Based Supportive Housing
Formula	\$5,516	\$1,244	\$36,961

SOURCE: IDIS, APR, and CAPER Data

C. Supportive Services Expenditures

Eligible Activities under HOPWA

Supportive services are a key component of the response to HIV and AIDS, and as recipients have experienced a number of barriers to stable housing and related care, HOPWA assistance helps clients connect to needed support such as health care services and community resources.

In 1992, the National Commission on AIDS noted the vital importance of housing as a base from which to receive care and access other support. HOPWA provides extensive amounts of housing support coupled with supportive services to clients. HOPWA clients receive access to health care and case management assistance in order to access community resources.

While housing remains the primary mission of the HOPWA program, grantees report using HOPWA as a bridge to other supportive services with the program often addressing the immediate need of housing and working with clients to access other services. Providers use funds for supportive services to support clients in assessing their needs and providing responsive support in order to maintain stable housing situations. HOPWA supportive services

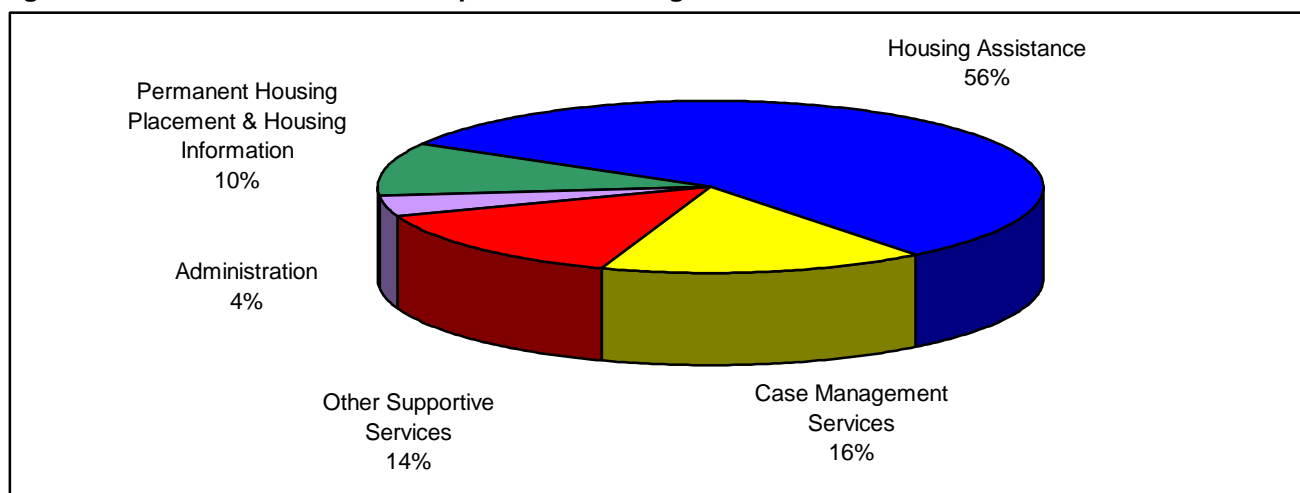
are defined as including, but not limited to, health, mental health, assessment, permanent housing placement, case management, drug and alcohol abuse treatment and counseling, day care, nutritional services, intensive care when required, and assistance in gaining access to local, state, and federal government benefits and services.

HOPWA grantees maximize program dollars by leveraging funds with local, state, and federal agencies to provide services to clients. HOPWA clients utilize a range of health and supportive services funded by HHS through the Ryan White Care Act, including case management and health care services.

Case Management

Case management services assist HOPWA recipients and their families gain access to and coordinate a full array of services, including medical, social, educational, vocational, and other services. Nearly 90 percent of providers report providing case management services to HOPWA clients to connect them with needed services (PD&R Study, 2001). Direct case management services for HOPWA clients comprises approximately 16% of all direct HOPWA expenditures, while direct housing assistance support, including permanent housing placement, comprises 66% of all expenditures.

Figure 8: Distribution of HOPWA Expenditures – Program Years 2000-2001 and 2001-2002



Source: IDIS, APR, and CAPER Data

Case management services include all of the following:

- Assessment of client housing and supportive services needs;
- Housing case plan development;
- Ongoing monitoring and service coordination; and
- Evaluation of case plan and assistance with adjustments made as needed.

In general, HIV/AIDS field managers are most often funded at AIDS service organizations with Ryan White CARE Act funds. These professionals generally assist clients with gaining linkages to health care, medication management, hospice, life skills training, transportation, child care, food, financial benefits, employment, emotional support, chore services and mental health and chemical dependency services. Approximately 92% of housing providers report they work to link clients to assistance provided under Ryan White CARE Act programs (PD&R Study, 2001).

In communities where caseloads are smaller, case managers may also be responsible for assisting clients to access affordable housing and administering housing and utility assistance programs. In communities with greater demand for services and where case managers are responsible for larger caseloads, activities may be more specialized into separate categories: (1) medical/psycho-social, (2) financial/benefits counseling, and (3) housing advocacy/case management.

Due to the HOPWA mission of providing stable housing, HOPWA case management differs from case management provided under programs which focus more exclusively on the provision of supportive and other services rather than housing. Housing case management differs significantly from other forms of case management in that it focuses primarily on the activities and concerns associated with assisting low income people, often those persons who are homeless or living with disabilities, obtain and maintain affordable, decent, safe housing.

The term case management may also vary greatly depending on the setting and population served. It can range from the oversight and maintenance of files for recipients of public housing subsidies or government benefits, with little to no in-person contact, to intensive management of a persons' life activities – including their health and well-being, financial transactions, housing, employment, training and general life coping skills which help support stable living arrangements.

Housing search, referral, and counseling entails particular expertise and familiarity with local housing markets, the complex requirements of various housing programs – both federally and locally funded, and fair housing laws. Once a person with AIDS is supported by a case manager who addresses their immediate need for shelter, ranging from emergency to affordable permanent housing, the housing case manager can address the need for medical/health care and other needs.

Housing case managers assist clients with the application paperwork for housing selection and placement, monitor housing wait lists, assist with the housing search phase, provide support in understanding tenant rights and responsibilities, and guide the client through the moving process, if needed. They act as an ongoing liaison among the client, property owner, and case manager if issues arise during tenancy that may threaten the client's housing stability.

Organizations that provide case management services report that, generally, the process of locating affordable housing units, building resource lists, and maintaining successful relationships with landlords takes patience and persistence. These programs report that most case managers frequently are challenged in trying to balance that process with their other client-care responsibilities and to navigate and monitor numerous housing processes happening simultaneously with multiple clients. In projects that provide specialized housing case management, housing advocates/housing case managers can focus particularly on the housing-related aspects of the client's needs and work in tandem with the case manager before, during and after housing placement takes place.

Supportive Services Expenditures

In connection with housing support, supportive services represent the second largest type of activity under the HOPWA program. Supportive services represent 30% of activities under the HOPWA program by amount of funds expended during program years 2000 and 2001. Over 90% of HOPWA grantees report providing supportive services in their comprehensive approaches to AIDS housing.

Although reported separately, these costs are highly integrated into the housing program components such as costs for onsite services offered in supportive housing facilities or services related to maintain persons in scattered site rental units. Figure 9 below, provides detailed information on expenditures. It is important to note that these figures do not include leveraged resources that more than doubles the federal funds made available for supportive services under HOPWA programs.

Of the total dollars spent on supportive services in program years 2000-2001 and 2001-2002, case management services are the most common supportive service funded with HOPWA dollars. Case management services are coupled with housing assistance to provide HOPWA clients with access to care, benefits, other housing resources, and community resources.

Other supportive services under HOPWA include drug abuse services, nutritional services, outreach, adult day care, health care services, life management, health services, childcare, transportation, education, employment, and other services.

Figure 9: Supportive Services Expenditures – Formula and Competitive Grantees – Program Years 2000-2001 and 2001-2002

Supportive Service	Formula 2000	Competitive 2000	Formula 2001	Competitive 2001	Total Expended
Outreach	1,902,044	426,560	4,835,122	439,343	7,603,069
Case management	35,463,151	2,843,117	45,920,521	3,060,728	87,287,517
Life Management	2,952,780	666,371	3,134,198	529,037	7,282,386
Nutritional Services	3,025,842	181,186	4,096,535	140,656	7,444,219
Adult Day Care	2,799,096	330,876	3,230,589	274,763	6,635,324
Child Care	731,924	5,163	1,433,505	73,692	2,244,284
Education	388,929	96,801	2,118,135	35,714	2,639,579
Employment Assistance	1,005,113	64,201	1,126,608	122,810	2,318,732
Drug Abuse Services	3,721,255	1,212,459	3,466,792	1,111,295	9,511,801
Mental Health Services	2,747,544	159,123	1,744,759	124,214	4,775,640
Health Care Services	2,676,517	269,055	3,216,606	320,237	6,482,415
Transportation	422,649	50,659	493,259	657,891	1,624,458
Other	6,882,596	991,417	14,116,277	80,931	22,071,221
TOTALS	64,719,440	7,296,988	88,932,906	6,971,311	167,920,645

SOURCE: IDIS and APR Data.

**Data notes: Data included under the category of other consists of a variety of services including: legal services, supplies, travel, and other related costs.*

D. Permanent Housing Placement, Housing Information, and Resource Identification

Ten percent of HOPWA dollars are used by HOPWA grantees to provide permanent housing placement services, housing information, or to conduct resource identification activities.

Permanent housing placement services provide HOPWA clients with information, access, and resources on available housing options that can help clients transition into new housing or self-sufficiency options. Housing information services, as defined in the HOPWA regulations, include but are not limited to counseling, information and referral services to assist an eligible person in locating, acquiring, financing, and maintaining housing.

Housing information also includes fair housing counseling for eligible persons. Resource identification activities undertaken by grantees include establishing, coordinating, and developing housing assistance resources for eligible persons including conducting preliminary research and marketing expenditures necessary to determine the feasibility of specific housing-related initiatives. Figure 10 details the expenditures in support of permanent housing placement, housing information, and resource identification activities. Over \$65 million was expended on these activities by HOPWA formula and competitive grantees during 1999-2001.

Figure 10: Permanent Housing Placement, Housing Information, and Resource Identification Expenditures – Formula and Competitive Grantees – 1999 – 2001*

Program Year	Permanent Housing Placement	Housing Information	Resource Identification	Total
1999	\$3,121,726	\$7,396,599	\$2,154,493	\$12,672,818
2000	\$16,848,039	\$2,919,326	\$1,884,571	\$21,651,936
2001	\$24,273,100	\$4,383,225	\$1,671,438	\$30,327,763
TOTAL	\$44,242,865	\$14,699,150	\$8,410,502	\$67,352,517

SOURCE: 1999 Report to Congress, IDIS, and APR data

**Data notes: A portion of the increases from 1999 to 2000 can be attributed to improvements in data collection and refinement of measurement instruments.*

E. Grantee Administrative Costs

Administrative costs are allowed by statute at up to 3 percent for grantee administration and up to 7 percent for project/sponsor administration. Grantees and project sponsors utilize administrative costs to cover staff salaries, office space, and other needs associated with administering the HOPWA grants. Figure 11 details the amount spent by competitive and formula grantees in program years 1999-2001.

Figure 11: Administrative Cost Expenditures – Formula and Competitive Grantees -- 1999-2001*

Program Year	Grantee Administration	Project Sponsor Administration
1999	\$5,110,224	\$8,985,145
2000	\$4,291,008	\$5,148,000
2001	\$5,094,390	\$7,478,034
TOTAL	\$14,495,622	\$21,611,179

SOURCE: 1999 Report to Congress, IDIS, and APR data

**Data notes: A portion of the increases from 1999 to 2000 can be attributed to improvements in data collection and refinement of measurement instruments.*

IV. Additional Information

A. Internet Resources

Additional information on individual HOPWA grantees and their programs is available. Executive summaries of each HOPWA formula and competitive grants is available through the HOPWA website at

<http://www.hud.gov/offices/cpd/aidshousing/reporting/execsummary/index.cfm>.

The grantee summaries include information on the community, program accomplishments, allocations, and contact information.

General information on the HOPWA program is available through the main HOPWA website at <http://www.hud.gov/offices/cpd/aidshousing/programs/index.cfm>.

The HUD Office of Policy Development and Research's National Evaluation of the Housing Opportunities for Persons with AIDS (HOPWA) program is also available on the Internet at: http://www.huduser.org/publications/hsgspec/hopwa_0101.html.

B. Notes on the Data Contained in this Report

It is important to note that additional data cleanup is underway at this time along with improvements in HOPWA performance evaluation. Due to the continual data cleanup efforts being undertaken by HUD, changes in the data are expected to occur as grantees complete their program year and report their annual information to HUD. The largest numbers of grantees operate on a July to June year and will report to HUD by October 1, 2003, on their 2002 year's accomplishments. HUD expects data for program year 2002 to be completed by December 31, 2003, for all current grantees.